

12/30/99
JC682 U.S. PTO

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PTO/SB/05 (12/97)

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UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>	Attorney Docket No.	GEMS:0074 15-GS-5362	Total Pages	67
	First Named Inventor or Application Identifier Gopal B. Avinash			
	Express Mail Label No.	EL 432 941 845 US		

APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>		Assistant Commissioner for Patents Box Patent Application Washington, DC 20231			
1. <input checked="" type="checkbox"/> Fee Transmittal Form <small>(Submit an original, and a duplicate for fee processing)</small>	6. <input type="checkbox"/> Microfiche Computer Program (Appendix)				
2. <input checked="" type="checkbox"/> Specification Total Pages 30 <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"> -Descriptive -Cross References to Related Application -Statement Regarding Fed sponsored R & D -Reference to Microfiche Appendix -Background of the Invention -Brief Summary of the Invention -Brief Description of the Drawings (if filed) -Detailed Description -Claim(s) -Abstract of the Disclosure 	7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies 				
3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) Total Sheets 11 Total Pages 33	8. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))				
4. Oath or Declaration <ul style="list-style-type: none"> a. <input checked="" type="checkbox"/> Newly executed (original or copy) unsigned b. <input type="checkbox"/> Copy from a prior application (37CFR 1.63(d)) <small>(for continuation/divisional with Box 17 completed)</small> <small>[Note Box 5 below]</small> <ul style="list-style-type: none"> i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small> 	9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <small>(where there is an assignee)</small>				
5. <input type="checkbox"/> Incorporation By Reference <small>(useable if Box 4b is checked)</small> The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.	10. <input type="checkbox"/> English Translation Document <small>(if applicable)</small> 11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations				
17. <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: /					12. <input type="checkbox"/> Preliminary Amendment
					13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) 14. <input type="checkbox"/> Small Entity <input type="checkbox"/> Statement filed in prior application Statement(s) <input type="checkbox"/> Status still proper and desired
					15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small> 16. <input type="checkbox"/> Other

17. Continuation Divisional Continuation-in-part (CIP) of prior application No: /**18. CORRESPONDENCE ADDRESS** Customer Number or Bar Code Label Correspondence address below

(Insert Customer No. or Attach bar code label here)

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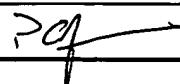
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FEE TRANSMITTAL

		Complete if Known			
		Application Number		Unassigned	
		Filing Date		Herewith	
		First Named Inventor		Gopal B. Avinash	
		Group Art Unit		Unknown	
		Examiner Name		Unknown	
TOTAL AMOUNT OF PAYMENT	(\$)	1,258.00		Attorney Docket Number	GEMS:0074/15-SG-5362

METHOD OF PAYMENT (check one)				FEE CALCULATION (continued)					
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit Account Number <u>07-0845/GEMS:0074/15-SG-5362</u> Deposit Account Name GE Medical Systems				3. ADDITIONAL FEES					
<input type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance, 37 CFR 1.31(b)				Large Entity Fee Code (\$)	Entity Fee (\$)	Small Entity Fee Code (\$)	Entity Fee (\$)		
				105	130	205	65	Fee Description	Fee Paid
				127	50	227	25	Surcharge - late filing fee or oath	_____
				139	130	139	130	Surcharge - late provisional filing or cover sheet.	_____
				147	2,520	147	2,520	Non-English specification	_____
				112	920*	112	920*	For filing a request for reexamination	_____
				113	1,840*	113	1,840*	Requesting publication of SIR prior to Examiner action	_____
				115	110	215	55	Requesting publication of SIR after Examiner action	_____
				116	400	216	200	Extension for response within first month	_____
				117	950	217	475	Extension for response within second month	_____
				118	1,570	218	755	Extension for response within third month	_____
				119	310	219	155	Extension for response within fourth month	_____
				120	310	220	155	Notice of Appeal	_____
				121	270	221	135	Filing a brief in support of an appeal	_____
				138	1,510	138	1,510	Request for oral hearing	_____
				140	110	240	55	Petition to institute a public use proceeding	_____
				141	1,320	241	660	Petition to revive unavoidably abandoned application	_____
				142	1,320	242	660	Petition to revive unintentionally abandoned application	_____
				143	450	243	225	Utility issue fee (or reissue)	_____
				144	670	244	335	Design issue fee	_____
				122	130	122	130	Plant issue fee	_____
				123	50	123	50	Petitions to the Commissioner	_____
				126	240	126	240	Petitions related to provisional applications	_____
				581	40	581	40	Submission of Information Disclosure Stmt	_____
				146	790	246	395	Recording each patent assignment per property (times number of properties)	_____
				149	790	249	395	Filing a submission after final rejection (37 CFR 1.129(a))	_____
				Other fee (specify) _____		For each additional invention to be examined (37 CFR 1.129(b))			
				Other fee (specify) _____		SUBTOTAL (3) (\$ 0.00)			
* Reduced by Basic Filing Fee Paid									

SUBMITTED BY				Complete (if applicable)		
Typed or Printed Name	Patrick S. Yoder	Reg. Number	37,478			
Signature		Date	December 30, 1999	Deposit Acct. User ID	07-0845/GEMS:0074/15-SG-5362	